File with:

Icwa Ethics and Campaign Disclosure Board 510 E. 12th, Ste 1A

Des Moines, Iowa 50319

Reset Form

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DISCLOSURE SUMMARY PAGE

Fax. 515-281-4073 COMMITTEE NAME (Must be sarpe as on Statement of Organization) FORM DISCLOSURE DR-2 REPORT IMPORTANT: Indicate by # type of committee you are reporting for 1 4 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (Rev. 07/2007) () istaliewide: Legislative: Judge Stanling for Retailing Candidate () jointe PAC () jointe Pacific () jointy Central Committee () County Candidate () City Candidate () jointy Central Committee () County Candidate () City Candidate () joint Candidate () j For Office Use Only Subdivision Candidate (3) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (Comm # Loaged Its ; Local Ballot Issue CANDIDATE COMMITTEES ONLY: Political Party (if applicable) Scanneri Computer Candidate Name Audited District (if Senate or House) Office Sought Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections £88,32A(7) and 68A,401(3), the candidate, for a 19-523 2631 TORE OF PERSON FILING REPORT REPORT FOR (1) ELECTION /(2) NON-ELECTION YEAR. Indicate by #] Local Committees, enter Date of Election report date) CHECK IF AMENDMENT TO REPORT DATED County & Local Committees, enter County in ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. which Election is held (You must continue to file reports until a DR-3 is filed.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the 1676.51 committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A. Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule H: Total Sales of Campaign Property (Attach Schedule H)...... (Schedule Happlies to Candidates' Committees Only) SUB-TOTAL\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see dobts and loans below) Schedule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report balance must be zero) \$ **UNPAID BILLS (From Schedule D - Attach Schedule D)..... \$ YES NO CONSULTANT BREAKDOWN (Schedule G Attached?) CANDIDATE COMMITTEES ONLY; VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

A ETHICS AND

For Instructions, See Back of Form

ONTRIBUTIONS - MONEY TAKEN IN	(Rev. 06/97)	MONETARY RECEIPTS
(Including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization)	, –	CK THIS BOX I NDING FORM
bruise ments Republican Centres Corners.	<u> </u>	

STATE CANDIDATES NOTE! IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B 32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1-3.08	ID# CK#	Uniteminal Cayens		\$ 862.50	
1-3.08	CK#	uniterminal Cayeus unterminal fee Contributions Strom		500.00	
	ID# CK#				
	ID# CK#				
	ID#				
	ID#				
	ID#				
	CK#		SUB-TOTAL	m12(1)	

TOTAL (If last page of this

schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consunguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY	
	CK THIS BOX IF	

COMMITTEE	NAME (Must be s	same as on Statement of Organization) ty Republican Cer	tallomm	
Jour	sasoun		PURPOSE	AMOUNT
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAMÉ AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	(DESCRIBE TRANSACTION)	EXPENDED
	ID#	Louisa County	meat for F. R.	\$ 100.00
1-15-08	CK#	Cattlementiallesa	0	\$ 7 0 -
	ID#	of Post poster	astock for	. 0 . (. ()
1-20-08	CK#	Washell Sa	Campatinis	184.68
	ID#	Low Lesertleson	deligate fear	440.00
3-12-08	CK#	farty wornes, in	0	740
~	ID#	Porcise tablesing	adv. Caucus	1170 51.
3.18.08	CK#	Wapelle, Ja 57653		479.56
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTAL	\$ 1204,24
			TOTAL (if last page of this schedule)	\$ 12.04.24

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventored on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 56.6(3)(i).)

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